

B1 (Official Form 1) (1/08)

UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF TEXAS HOUSTON DIVISION					Voluntary Petition	
Name of Debtor (if individual, enter Last, First, Middle): Work Zone Products, Inc			Name of Joint Debtor (Spouse) (Last, First, Middle):			
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):			All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):			
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 76-0514717			Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all):			
Street Address of Debtor (No. and Street, City, and State): 6358 Pinemont Dr Houston, TX			Street Address of Joint Debtor (No. and Street, City, and State):			
ZIP CODE 77092			ZIP CODE			
County of Residence or of the Principal Place of Business: Harris			County of Residence or of the Principal Place of Business:			
Mailing Address of Debtor (if different from street address):			Mailing Address of Joint Debtor (if different from street address):			
ZIP CODE			ZIP CODE			
Location of Principal Assets of Business Debtor (if different from street address above):						
ZIP CODE						
Type of Debtor (Form of Organization) (Check one box.) <input type="checkbox"/> Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)		Nature of Business (Check one box.) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other <hr/> Tax-Exempt Entity (Check box, if applicable.) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).		Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box.) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <hr/> Nature of Debts (Check one box.) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.		
Filing Fee (Check one box.) <input checked="" type="checkbox"/> Full Filing Fee attached. <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.			Check one box: Chapter 11 Debtors <input checked="" type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,190,000. <hr/> Check all applicable boxes: <input type="checkbox"/> plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).			
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors. Estimated Number of Creditors <input type="checkbox"/> 1-49 <input checked="" type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> Over 100,000 Estimated Assets <input type="checkbox"/> \$0 to \$50,000 <input checked="" type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion Estimated Liabilities <input type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input checked="" type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion						THIS SPACE IS FOR COURT USE ONLY

Voluntary Petition <i>(This page must be completed and filed in every case.)</i>		Name of Debtor(s): Work Zone Products, Inc	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet.)			
Location Where Filed: None	Case Number:	Date Filed:	
Location Where Filed:	Case Number:	Date Filed:	
Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor (If more than one, attach additional sheet.)			
Name of Debtor: None	Case Number:	Date Filed:	
District:	Relationship:	Judge:	
Exhibit A (To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input checked="" type="checkbox"/> Exhibit A is attached and made a part of this petition.		Exhibit B (To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b). <div style="text-align: right;"> X _____ Date </div>	
Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box.) <input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. <input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. <input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes.) <input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) <div style="text-align: right;"> _____ (Name of landlord that obtained judgment) </div> <div style="text-align: right;"> _____ (Address of landlord) </div> <input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and <input type="checkbox"/> Debtor has included in this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. <input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

Voluntary Petition*(This page must be completed and filed in every case)*Name of Debtor(s): **Work Zone Products, Inc****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X _____**X** __________
Telephone Number (If not represented by attorney)_____
Date**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

☐ I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

☐ Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

X _____

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)_____
Date**Signature of Attorney***

X /s/ Peter Johnson
Peter Johnson Bar No. **10778400**

Peter Johnson
Suite 2820
11 Greenway Plaza
Houston, Texas 77046

Phone No. **(713) 961-1200** Fax No. **(713) 961-0941**04/11/2008

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Work Zone Products, Inc

X /s/ Patricia Oakes
Signature of Authorized Individual

Patricia Oakes

Printed Name of Authorized Individual

President

Title of Authorized Individual

04/11/2008

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address**X** __________
Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Work Zone Products, Inc**

CASE NO

CHAPTER **11****EXHIBIT "A" TO VOLUNTARY PETITION**

1. Debtor's employer identification number is <u>76-0514717</u> .		
2. If any of debtor's securities are registered under section 12 of the Securities and Exchange Act of 1934, the SEC file number is _____.		
3. The following financial data is the latest available information and refers to the debtor's condition on _____.		
a. Total Assets		
b. Total Liabilities		
Secured debt	Amounts	Approximate number of holders
Fixed, liquidated secured debt		
Contingent secured debt		
Disputed secured debt		
Unliquidated secured debt		
Unsecured debt	Amounts	Approximate number of holders
Fixed, liquidated unsecured debt		
Contingent unsecured debt		
Disputed unsecured debt		
Unliquidated unsecured debt		
Stock	Amounts	Approximate number of holders
Number of shares of preferred stock		
Number of shares of common stock	1150	2
Comments, if any		
4. Brief description of debtor's business: <i>Traffic control and striping service</i>		

UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

IN RE: **Work Zone Products, Inc**

CASE NO

CHAPTER **11**

EXHIBIT "A" TO VOLUNTARY PETITION

Continuation Sheet No. 1

5. List the name of any person who directly or indirectly owns, controls, or holds, with power to vote, 20% or more of the voting securities of the debtor:

6. List the name of all corporations 20% or more of the outstanding voting securities of which are directly or indirectly owned, controlled, or held, with power to vote, by debtor:

*PATRICIA OAKES
6358 PINEMONT
HOUSTON, TX 77018*

I, **Patricia Oakes** the **President** of the corporation
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing Exhibit "A" to Voluntary Petition, and
that it is true and correct to the best of my information and belief.

Date: **04/11/2008**

Signature: */s/ Patricia Oakes*
Patricia Oakes
President

B4 (Official Form 4) (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Work Zone Products, Inc**

Case No.

Chapter **11**

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]

THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Non-Purchase Money	\$361,863.07	Value: \$0.00
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THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Non-Purchase Money	\$318,153.82	Value: \$0.00
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THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Non-Purchase Money	\$140,080.95	Value: \$0.00
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Sherwin Williams 6501 Antoine Dr Houston, TX 77091	Trade Credit	\$71,388.22	
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Ennis Paint Co. P.O. Box 671185 Dallas, TX 75267-1185	Trade Credit	\$67,000.00	
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Ennis Paint	Collecting for - Ennis Paint	\$67,000.00	
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B4 (Official Form 4) (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Work Zone Products, Inc**

Case No.

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS***Continuation Sheet No. 1*

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]

THE FROST NATIONAL BANK
P.O. BOX 1600
SAN ANTONIO, TX, 78296

Purchase Money Security Interest

\$51,712.56**Value: \$0.00**

American Express
P.O. Box 630001
Dallas, TX 75363-0001

Trade Credit

\$43,000.00

3M
P.O.Box 200715
Dallas, TX 75320-0715

Trade Credit

\$38,874.48

Nipon Carbide

Trade Credit

\$22,311.92

THE FROST NATIONAL BANK
P.O. BOX 1600
SAN ANTONIO, TX, 78296

Non-Purchase Money

\$20,374.32**Value: \$0.00**

Stuart Allen & Associates, Inc.
5447 E 5th Street, Suite 110
Tucson, AZ 85711

Collecting for - Potters Industries

\$15,101.45

STERLING BANK
10301 KATY FWY
HOUSTON, TX, 77024

Non-Purchase Money

\$14,384.25**Value: \$0.00**

B4 (Official Form 4) (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Work Zone Products, Inc**

Case No.

Chapter **11****LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS***Continuation Sheet No. 2*

(1)	(2)	(3)	(4)	(5)
Name of creditor and complete mailing address, including zip code	Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted	Nature of claim (trade debt, bank loan, government contract, etc.)	Indicate if claim is contingent, unliquidated, disputed, or subject to setoff	Amount of claim [if secured also state value of security]
Mikedon 9002 Wayfarer Ln. Box 750963 Houston, Texas 77275-0963		Tade Credit		\$13,604.93
Potters Industries Inc. PO Box 840 Valley Forge, PA 19482-0840		Tade Credit		\$13,131.45
The Childress Law Office 5100 Indian School Rd. NE Ste 28 Albuquerque, NM 87110		Collecting for - Nation Trench Safety		\$13,000.00
Paul Bettencourt Tax Assessor-Collector P.O. Box 4622 Houston, TX 77210		2007 Taxes		\$12,946.85
AB Gas Co. 4722 W 18th st Houston, TX 77092		Tade Credit		\$12,361.07
Grainger 8200 Pinemont Houston, TX 77040-6520		Tade Credit		\$12,100.71
Gulf States Asphalt Company, L.P. 300 Christy Place P.O. Box 508 South Houston, TX 77587-0508		Tade Credit		\$12,088.84

B4 (Official Form 4) (12/07)

**UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE: **Work Zone Products, Inc**

Case No.

Chapter **11**

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Continuation Sheet No. 3

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the President of the Corporation
named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date: 04/11/2008

Signature: /s/ Patricia Oakes
Patricia Oakes
President

Peter Johnson
Peter Johnson
Suite 2820
11 Greenway Plaza
Houston, Texas 77046
(713) 961-1200
Attorney for the Petitioner

10778400

UNITED STATES BANKRUPTCY COURT FOR THE

SOUTHERN DISTRICT OF TEXAS

HOUSTON DIVISION

In re:

Case No.:

Work Zone Products, IncSSN: **76-0514717**

SSN: _____

Debtor(s)

Numbered Listing of Creditors

Address:

6358 Pinemont Dr
Houston, Texas 77092

Chapter: **11**

	Creditor name and mailing address	Category of claim	Amount of claim
1.	3M P.O.Box 200715 Dallas, TX 75320-0715	Unsecured Claim	\$38,874.48
2.	AB Gas Co. 4722 W 18th st Houston, TX 77092	Unsecured Claim	\$12,361.07
3.	Altus Athletic/OK-1 Mfg. 709 Veterans PO Box 8388 Altus, OK 73522	Unsecured Claim	\$472.60
4.	American Express P.O. Box 630001 Dallas, TX 75363-0001	Unsecured Claim	\$43,000.00
5.	Aztec Rental 2001 W. 34th Street Houston, TX 77018	Unsecured Claim	\$3,692.15
6.	Bartula Enterprises, Inc. 1051 Chesire Ln. Houston, Texas 77018	Unsecured Claim	\$3,791.85

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
7.	Batterson, Inc. 955 Judiway Houston, Texas 77018	Unsecured Claim	\$6,359.90
8.	Caterpillar Financial Services Corp. 2120 West End Ave. Nashville, Tenn. 37203	Unsecured Claim	\$766.59
9.	CenterPoint Energy PO Box 1325 Houston, TX 77251-1325	Unsecured Claim	\$0.00
10.	CenterPoint Energy 5130770-0 PO Box 2628 Houston, TX 77252	Unsecured Claim	\$0.00
11.	City of Houston Water Dept PO Box 1560 Houston, TX 77251	Unsecured Claim	\$582.15
12.	Coface Collections North America, Inc. P.O. Box 8510 Metairie, LA 70011	Unsecured Claim	\$0.00
13.	Dicke Tool Co. 36438 Treasury Center Chicago IL. 60694-6400	Unsecured Claim	\$489.30
14.	Donald C Young III, MD 427 W 20th Street, Suite 210 Houston, TX 77008	Unsecured Claim	\$450.00
15.	Energy Absorption Systems, Inc. 35 E Wacker Dr. Chicago, IL 60601	Unsecured Claim	\$9,200.00

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
16.	Ennis Paint	Unsecured Claim	\$67,000.00
17.	Ennis Paint Co. P.O. Box 671185 Dallas, TX 75267-1185	Unsecured Claim	\$67,000.00
18.	Exxon PO box 530962 Alanta, GA 30353-0962	Unsecured Claim	\$2,524.84
19.	Fatetteville Propane Company, Inc. PO Box 218 Fayetteville, TX 78940	Unsecured Claim	\$353.22
20.	Flint Trading, Inc. PO Box 160 Thomasville, NC 27361	Unsecured Claim	\$4,747.71
21.	General Truck Body 7110 Jensen Dr. Houston, TX 77093	Unsecured Claim	\$3,961.00
22.	Gilliam's Grocery Charge Accounts 714 Gene Street Buffalo, TX 75831	Unsecured Claim	\$981.58
23.	Grainger 8200 Pinemont Houston, TX 77040-6520	Unsecured Claim	\$12,100.71
24.	Graphic Solutions Group PO Box 671261 Dallas, TX 75267-1261	Unsecured Claim	\$1,035.07

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
25.	Gulf States Asphalt Company, L.P. 300 Christy Place P.O. Box 508 South Houston, TX 77587-0508	Unsecured Claim	\$12,088.84
26.	Harris County xxx5801	Priority Claim	\$5,597.70
27.	Harris County xxx6160	Priority Claim	\$7,223.44
28.	Harris County P.O. Box 4576 Houston, TX 77210 xxxxxxxx0000	Priority Claim	\$3.22
29.	Houston Alternator 1835 N. Shepherd Drive Houston, TX 77008	Unsecured Claim	\$294.46
30.	INTERNAL REVENUE SERVICE P O BOX 145595 MC 8420G CINCINNATI, OH, 45250-5595	Secured Claim	\$4,360.46
31.	Interstate All Battery Center 8350 Westheimer Houston, TX 77063	Unsecured Claim	\$1,966.90
32.	Kriscon 6800 Bingle Rd. Houston, tx 77092-1113	Unsecured Claim	\$3,702.47
33.	MERIT FINANCIAL, INC 10590 WESTOFFICE DR SUITE 280 HOUSTON, TX, 77042	Secured Claim	

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
34.	Mikedon 9002 Wayfarer Ln. Box 750963 Houston, Texas 77275-0963	Unsecured Claim	\$13,604.93
35.	Munsch Hardt Kopf & Harr 3800 Lincoln Plaza 500 N Akard Street Dallas, TX 75201	Unsecured Claim	\$0.00
36.	Napa Auto Parts 5110 Antoine Drive Houston, TX 77092	Unsecured Claim	\$2,244.77
37.	National Signal, Inc. 9603 John St. Santa Fe Springs, CA 90670	Unsecured Claim	\$996.14
38.	NEC Financial Services PO Box 100558 Pasadena, CA 91189-0558	Unsecured Claim	\$393.36
39.	Nick's Diesel Service Interstate Billing Service, Inc. Dept. 1 PO Box 2153 Birmingham, AL 35287-1265	Unsecured Claim	\$3,393.37
40.	Nipon Carbide	Unsecured Claim	\$22,311.92
41.	Northwest Pipe Company 6307 Toledo Houston, TX 77008	Unsecured Claim	\$9,300.99
42.	Nut Place, Inc./The 6606 N. Gessner Houston, TX 77040 713-462-3147	Unsecured Claim	\$891.68

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
43.	O'Rourke Petroleum 223 McCarty Dr Houston, TX 77029	Unsecured Claim	\$11,920.28
44.	Pacesetter Personnel Service P.O. Box 684005 Houston, TX 77268-4005	Unsecured Claim	\$80.62
45.	Paul Bettencourt Tax Assessor-Collector P.O. Box 7622 Houston, TX 77210 x-xxx7289	Priority Claim	\$27.46
46.	Paul Bettencourt Tax Assessor-Collector P.O. Box 4622 Houston, TX 77210 x-xxx6160	Priority Claim	\$12,946.85
47.	Phoneline Technologies, Inc. 6820 N Eldridge #502 Houston, TX 77041	Unsecured Claim	\$115.83
48.	Pitney Bowes PO Box 856390 Louisville, KY 40285-6390	Unsecured Claim	\$2,493.20
49.	Potters Industries Inc. PO Box 840 Valley Forge, PA 19482-0840	Unsecured Claim	\$13,131.45
50.	Premium Assignment Corporation 3522 Thomasville Rd. Suit 400 Tallahassee, FL 32309	Unsecured Claim	\$6,286.76
51.	Presco Products Co. P.O. Box 226467 Dallas, TX 75222-6467	Unsecured Claim	\$1,116.00

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
52.	Sherwin Williams 6501 Antoine Dr Houston, TX 77091	Unsecured Claim	\$71,388.22
53.	Stasco 1140 Rothwell Houston, Texas 77002	Unsecured Claim	\$645.23
54.	State of Texas Comptroller of Public Accounts Revenue of Accounting Division P.O. Box 13528 Austin, TX 78711 xxxxxx7176	Priority Claim	\$3,000.00
55.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxx3075	Secured Claim	\$3,938.46
56.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx3076	Secured Claim	\$2,577.36
57.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxx4367	Secured Claim	\$3,434.35
58.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx2914	Secured Claim	\$6,961.60
59.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx7252	Secured Claim	\$3,624.25
60.	STERLING BANK 10301 KATY FWY HOUSTON, TX, 77024 xxxxx8032	Secured Claim	\$14,384.25

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
61.	Stuart Allen & Associates, Inc. 5447 E 5th Street, Suite 110 Tucson, AZ 85711 xxxx8355	Unsecured Claim	\$15,101.45
62.	Team Ford 9965 Highway 6 Navasota, TX 77868	Unsecured Claim	\$100.00
63.	The Childress Law Office 5100 Indian School Rd. NE Ste 28 Albuquerque, NM 87110	Unsecured Claim	\$13,000.00
64.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$140,080.95
65.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$51,712.56
66.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$361,863.07
67.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$318,153.82
68.	THE FROST NATIONAL BANK P.O. BOX 1600 SAN ANTONIO, TX, 78296	Secured Claim	\$20,374.32
69.	TimeWise Delivery 1425 Overhill Suite 110 Houston, Texas 77018	Unsecured Claim	\$492.00

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

	Creditor name and mailing address	Category of claim	Amount of claim
70.	Tommie Vaughn Ford 1145 N. Shepherd Houston, TX 77008	Unsecured Claim	\$676.24
71.	Trafco Industries, Inc. 414 West Main Eagle Lake, TX 77434	Unsecured Claim	\$4,300.00
72.	Traffic Supply 500 FM 3013 W. EAGLE LAKE, TX 77434	Unsecured Claim	\$3,826.00
73.	Trailer Wheel & Frame 8222 N. Freeway Houston, TX 77037	Unsecured Claim	\$877.77
74.	Trantex 3310 Frick Road, Bldg. d Houston, TX 77086	Unsecured Claim	\$4,701.96
75.	United Rentals Highway Technologies 36353 Treasury Center Chicago, IL 60694-6300	Unsecured Claim	\$6,817.69
76.	Westside Automotive & Tire Service PO Box 41089 Houston, TX 77241	Unsecured Claim	\$895.08
77.	Wolf Recovery Systems, Inc. P.O. Box 207 Baytown, TX 77522	Unsecured Claim	\$2,500.00

in re: **Work Zone Products, Inc**

Debtor

Case No. (if known)

(The penalty for making a false statement or concealing property is a fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. secs. 152 and 3571.)

DECLARATION

I, **Work Zone Products, Inc**

named as debtor in this case, declare under penalty of perjury that I have read the foregoing *Numbered Listing of Creditors*, consisting of 10 sheets (including this declaration), and that it is true and correct to the best of my information and belief. the best of my information and belief.

Debtor: /s/ Patricia Oakes

Date: 04/11/2008

Patricia Oakes
President

CERTIFICATION AND SIGNATURE OF NON-ATTORNEY BANKRUPTCY PETITION PREPARER (see 11 U.S.C. § 110)

certify that I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110, that I prepared this document for compensation, and that I have provided the debtor with a copy of this document.

Printed or Typed Name of Bankruptcy Petition Preparer

Social Security Number

Address

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Forms for each person.

**IN THE UNITED STATES BANKRUPTCY COURT
SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION**

IN RE:

Work Zone Products, Inc

DEBTOR(S)

§
§
§
§
§
§

No.
Chapter 11

**STATEMENT OF TAX RETURN
BALANCE SHEET, STATEMENT OF OPERATIONS**

The undersigned, being the authorized representative of the Debtor(s) in the above-styled case hereby certify under the penalty of perjury that the most recently filed federal tax return is attached hereto together with the most recent balance sheet and statement of operations or cash-flow statement.

.

Dated: April 11, 2008

/s/ Work Zone Products, Inc

/s/ Patricia Oakes

1:32 PM

04/10/08

Accrual Basis

Work Zone Products, Inc.

Balance Sheet

As of December 31, 2007

	Dec 31, 07
ASSETS	
Current Assets	
Checking/Savings	
Frost Bank - #50 9849173	16,973.53
Total Checking/Savings	16,973.53
Accounts Receivable	
Retainage Accounts Receivable	15,778.06
Trade Accounts Receivable	547,816.73
Total Accounts Receivable	563,594.79
Other Current Assets	
Employee Advances	-84.02
Payroll Asset	-3,277.00
Note Receivable 000	100,000.00
Retainage Held	
Retainage Account	-150.88
Retainage Held - Other	58,147.56
Total Retainage Held	57,996.68
Advances to employees	2,355.00
Note receivable	80,316.41
Shareholder Loan	77,213.65
Undeposited Funds	21,206.89
Total Other Current Assets	335,727.61
Total Current Assets	916,295.93
Fixed Assets	
2005 Thermoplastic Trailer	49,469.06
Furniture & Fixtures	52,389.66
Leasehold Improvements	9,228.12
Machine & Equipment	323,786.90
Trucks	
F650 Vehicle -2004 TMA	28,026.52
2006 Land Rover	70,356.86
2005 Ford F450	41,234.19
2005 Ford F550	39,311.87
2000 F650 TMA	31,646.11
2000 F350	24,459.79
2002 F150	15,169.42
2002 F250 TC	30,692.04
2003 Ford F250 Ext Cab	29,280.23
2003 Ford F550	37,003.11
2003 Ford F550 Striping	38,452.88
2003 Volvo Chasis	318,523.95
2004 GMC Yukon	22,000.00
2004 Isuzu (Paint Truck)	210,342.00
Mercedez	42,294.55
Trucks - Other	9,503.00
Total Trucks	988,296.52
Accumulated depreciation	-702,185.27
Total Fixed Assets	720,984.99
Other Assets	
Mystery Asset	58,228.07
Organization costs	1,065.90
Accumulated amortization	-1,065.90
Total Other Assets	58,228.07
TOTAL ASSETS	1,695,508.99
LIABILITIES & EQUITY	
Liabilities	
Current Liabilities	
Accounts Payable	
Accounts Payable	259,341.58
Total Accounts Payable	259,341.58

1:32 PM

04/10/08

Accrual Basis

Work Zone Products, Inc.**Balance Sheet****As of December 31, 2007**

	Dec 31, 07
Credit Cards	
Home Depot	762.00
Office Depot	7,948.86
Sterling Bank Visa	100.00
Total Credit Cards	8,810.86
Other Current Liabilities	
Property Taxes - Building	-6,387.69
Mystery Liability	-1,243.03
Child Support Chris	-704.99
Direct Deposit Liabilities	-1,504.49
Child support Stan	-3,741.84
Payroll Liabilities	69,484.66
Sales Tax Payable	44,043.89
Total Other Current Liabilities	99,946.51
Total Current Liabilities	368,098.95
Long Term Liabilities	
Frost Bank #9003 - LOC	339,325.75
Frost Bank #9004 - SB P/O Loan	313,906.34
Frost Bank #9001- Equipment LOC	133,581.86
Frost Bank #9002 - Land Rover	51,073.46
Sterling Bank #210057252	20,295.76
Sterling Bank #811052914	16,457.42
Sterling Bank #307058032	25,927.92
Sterling Bank #11054367	16,859.77
Chase - 2002 Ford F150	-312.41
Mercedes Benz	27,227.11
Sterling -Old Loan Payment	1,712.54
Sterling Bank #112503076	10,480.00
Sterling Bank #21803075	4,416.08
Total Long Term Liabilities	960,951.60
Total Liabilities	1,329,050.55
Equity	
Shareholder Investment	-13,636.40
Common stock	38,534.74
Retained Earnings	392,854.81
Net Income	-51,294.71
Total Equity	366,458.44
TOTAL LIABILITIES & EQUITY	1,695,508.99

1:29 PM

04/10/08

Accrual Basis

Work Zone Products, Inc.
Profit & Loss
 January through December 2007

	Jan - Dec 07
Ordinary Income/Expense	
Income	
Negotiate	-1,188.74
Outside Income	1,042.37
Rental Income	521,472.98
Sales	1,721,101.57
Sales Income	-1,520.00
Total Income	2,240,908.18
Cost of Goods Sold	
Caterpillar Equipment Lease	7,047.04
Job Materials	465,555.27
Job Labor	382,891.65
Fuel	77,478.10
Freight & Delivery	7,127.93
Equipment Repairs	6,800.34
Equipment Rental	8,385.80
Bid Expense	13,496.41
Auto Insurance	5,309.89
Total COGS	974,092.43
Gross Profit	1,266,815.75
Expense	
Sterling Bank -#21803075	969.33
Sterling Bank -#210057252	966.51
Void	0.00
Reconciliation Discrepancies	-0.35
Reimbursement	2,959.50
Equipment Rental Expense	9,913.81
Mystery Expense	8,438.82
Quantity Variance	129.28
Construction Expense	14,200.00
Advertisement	6,415.41
Automobile Expense	8,979.24
Bad Debt	7,970.42
Bank Service Charges	25,364.79
Business Gifts	842.45
Computer	6,274.05
Consulting	52,034.00
Contributions	2,709.72
Credit Card Fees	968.62
Depreciation Expense	91,000.00
Dues and Subscriptions	18,467.74
Employee Benefit Expense	29,973.46
Employee Uniforms	2,056.44
Insurance	98,882.55
Interest Expense	35,309.30
Lease	20,365.96
Licenses and Permits	2,960.78
Maintenance	12,601.02
Miscellaneous	1,918.99
Office Supplies	10,684.55
Payroll Expenses	568,959.30
Postage and Delivery	3,372.79
Printing and Reproduction	884.06
Professional Fees	24,327.27
Rent	95,383.76
Repairs	35,916.56
Security	2,419.90
Shop Supplies	22,154.17
Taxes	18,140.26
Telephone	36,377.18

1:29 PM

04/10/08

Accrual Basis

Work Zone Products, Inc.**Profit & Loss****January through December 2007**

	<u>Jan - Dec 07</u>
Training	4,250.00
Travel & Ent	14,856.84
Utilities	<u>17,711.98</u>
Total Expense	<u>1,318,110.46</u>
Net Ordinary Income	<u>-51,294.71</u>
Net Income	<u><u>-51,294.71</u></u>

ABERCROMBIE & ASSOCIATES, PC

14550 TORREY CHASE, SUITE 120
HOUSTON, TX 77014
(281) 440-5740

Client 11455100
April 18, 2007

Work Zone Products, Inc.
P.O Box 924913
Houston, TX 77292-4913
713-290-9675

FEDERAL FORMS

Form 1120	2005 U.S. Corporation Income Tax Return
Form 2220	Underpayment of Estimated Tax by Corporations
Form 4562	Depreciation and Amortization
Form 4797	Sale of Business Property
Form 7004	Application for Automatic Extension Depreciation Schedules

TEXAS FORMS

Form 05-102	Texas Public Information Report
Form 05-110	Texas Extension Request
Form 05-142	Texas Franchise Tax Report Texas Depreciation Schedules

FEE SUMMARY

Preparation Fee

2005

FEDERAL INCOME TAX SUMMARY

PAGE 1

WORK ZONE PRODUCTS, INC.

76-0514717

	2005	2004	DIFF
INCOME			
GROSS RECEIPTS LESS RETURNS/ALLOWANCE....	3,891,016	2,386,375	1,504,641
COST OF GOODS SOLD (SCHEDULE A).....	1,911,900	1,868,400	43,500
GROSS PROFIT.....	1,979,116	517,975	1,461,141
GROSS RENTS.....	0	782,925	-782,925
NET GAIN (OR LOSS) FROM 4797.....	-357	0	-357
TOTAL INCOME.....	1,978,759	1,300,900	677,859
DEDUCTIONS			
COMPENSATION OF OFFICERS.....	380,477	127,130	253,347
SALARIES/WAGES LESS EMPLOYMENT CREDITS..	230,623	204,979	25,644
REPAIRS AND MAINTENANCE.....	47,291	31,978	15,313
BAD DEBTS.....	407,991	85,400	322,591
RENTS.....	41,945	45,438	-3,493
TAXES AND LICENSES.....	114,442	144,793	-30,351
INTEREST.....	71,316	69,101	2,215
CONTRIBUTIONS.....	3,353	6,416	-3,063
DEPRECIATION.....	180,061	179,649	412
ADVERTISING.....	7,931	1,860	6,071
EMPLOYEE BENEFIT PROGRAMS.....	0	28,080	-28,080
OTHER DEDUCTIONS.....	463,156	318,335	144,821
TOTAL DEDUCTIONS.....	1,948,586	1,243,159	705,427
TAXABLE INCOME			
TAXABLE INCOME (LINE 28).....	30,173	57,741	-27,568
TAXABLE INCOME.....	30,173	57,741	-27,568
TAX COMPUTATION			
INCOME TAX.....	4,526	9,435	-4,909
TOTAL TAX.....	4,526	9,435	-4,909
PAYMENTS AND CREDITS			
TAX DEPOSITED WITH FORM 7004.....	0	9,525	-9,525
TOTAL PAYMENTS AND CREDITS.....	0	9,525	-9,525
REFUND OR AMOUNT DUE			
OVERPAYMENT.....	0	25	-25
OVERPAYMENT CREDITED TO NEXT YEAR.....	0	25	-25
UNDERPAYMENT PENALTY.....	182	65	117
TAX DUE.....	4,708	0	4,708
SCHEDULE L			
BEGINNING ASSETS.....	1,258,171	1,196,086	62,085
BEGINNING LIABILITIES & EQUITY.....	1,258,171	1,196,086	62,085
ENDING ASSETS.....	1,342,748	1,258,171	84,577
ENDING LIABILITIES & EQUITY.....	1,342,748	1,258,171	84,577
TAX RATES			
MARGINAL TAX RATE.....	15.0%	25.0%	-10.0%
EFFECTIVE TAX RATE.....	15.0%	16.3%	-1.3%

2005

FEDERAL BALANCE SHEET SUMMARY

PAGE 1

WORK ZONE PRODUCTS, INC.

76-0514717

ENDING ASSETS

CASH		47,614
ACCOUNTS RECEIVABLE	590,846	
LESS: ALLOWANCE FOR BAD DEBTS	(0)	590,846
OTHER CURRENT ASSETS		335,079
LOANS TO SHAREHOLDERS		89,414
BUILDINGS AND OTHER ASSETS	1,302,117	
LESS: ACCUMULATED DEPRECIATION	(1,054,118)	247,999
INTANGIBLE ASSETS	1,066	
LESS: ACCUMULATED AMORTIZATION	(1,066)	31,796
OTHER ASSETS		
TOTAL ASSETS		1,342,748

ENDING LIABILITIES & EQUITY

ACCOUNTS PAYABLE		340,239
SHORT TERM NOTES PAYABLE		399,837
OTHER CURRENT LIABILITIES		64,712
LONG TERM NOTES PAYABLE		364,704
COMMON STOCK	2,000	2,000
ADDITIONAL PAID-IN CAPITAL		36,535
UNAPPROPRIATED RETAINED EARNINGS		134,721
TOTAL LIABILITIES AND EQUITY		1,342,748

2005

TEXAS INCOME TAX SUMMARY

PAGE 1

WORK ZONE PRODUCTS, INC.

0140896500

	2005	2004	DIFF
SCHEDULE A			
GROSS RECEIPTS IN TEXAS.....	3,891,016	3,169,300	721,716
GROSS RECEIPTS EVERYWHERE.....	3,891,016	3,169,300	721,716
APPORTIONMENT FACTOR.....	1.0000	1.0000	0.0000
STATED CAPITAL.....	2,000	2,000	0
SURPLUS.....	171,256	161,222	10,034
TOTAL TAXABLE CAPITAL.....	173,256	163,222	10,034
APPORTIONED TAXABLE CAPITAL.....	173,256	163,222	10,034
NET TAXABLE CAPITAL.....	173,256	163,222	10,034
TAX DUE ON NET TAXABLE CAPITAL.....	433	408	25
SCHEDULE B			
GROSS RECEIPTS IN TEXAS.....	3,891,016	3,169,300	721,716
GROSS RECEIPTS EVERYWHERE.....	3,891,016	3,169,300	721,716
APPORTIONMENT FACTOR.....	1.0000	1.0000	0.0000
FEDERAL TAXABLE INCOME.....	51,071	24,631	26,440
EARNED SURPLUS.....	51,071	24,631	26,440
APPORTIONED EARNED SURPLUS.....	51,071	24,631	26,440
APPORTIONED PLUS ALLOC. EARNED SURPLUS.....	51,071	24,631	26,440
NET TAXABLE EARNED SURPLUS.....	51,071	24,631	26,440
TAX DUE ON NET TAXABLE EARNED SURPLUS.....	2,298	1,108	1,190
NET TAX DUE ON NET TAX. EARNED SURPLUS.....	2,298	1,108	1,190
NET TAX DUE.....	2,298	1,108	1,190
TOTAL TAX DUE.....	2,298	1,108	1,190
AMOUNT DUE AND PAYABLE			
TOTAL TAX DUE.....	2,298	1,108	1,190
PRIOR PAYMENTS.....	1,110	0	1,110
NET TAX DUE.....	1,188	1,108	80
TOTAL AMOUNT DUE AND PAYABLE.....	1,188	1,108	80
TAX RATES			
MARGINAL TAX RATE.....	4.5%	4.5%	0.0%
EFFECTIVE TAX RATE.....	4.5%	4.5%	0.0%

2005	GENERAL INFORMATION	PAGE 1									
	WORK ZONE PRODUCTS, INC.	76-0514717									
FORMS NEEDED FOR THIS RETURN FEDERAL: 1120, 2220, 4562, 4797, 7004 TEXAS: 05-102, 05-110, 05-142, 05-143											
TAX RATES <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th></th> <th style="text-align: center;">MARGINAL</th> <th style="text-align: center;">EFFECTIVE</th> </tr> </thead> <tbody> <tr> <td>FEDERAL</td> <td style="text-align: center;">15%</td> <td style="text-align: center;">15%</td> </tr> <tr> <td>TEXAS</td> <td style="text-align: center;">4.5%</td> <td style="text-align: center;">4.5%</td> </tr> </tbody> </table>				MARGINAL	EFFECTIVE	FEDERAL	15%	15%	TEXAS	4.5%	4.5%
	MARGINAL	EFFECTIVE									
FEDERAL	15%	15%									
TEXAS	4.5%	4.5%									
UNDERPAYMENT PENALTY <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 80%;">FEDERAL</td> <td style="text-align: right;">182.</td> </tr> </table>			FEDERAL	182.							
FEDERAL	182.										
CARRYOVERS TO 2006 <table style="width: 100%; margin-top: 10px;"> <tr> <td style="width: 80%;">FEDERAL CARRYOVERS</td> <td></td> </tr> <tr> <td>CONTRIBUTIONS - PRIOR YEARS</td> <td style="text-align: right;">2,473.</td> </tr> </table>			FEDERAL CARRYOVERS		CONTRIBUTIONS - PRIOR YEARS	2,473.					
FEDERAL CARRYOVERS											
CONTRIBUTIONS - PRIOR YEARS	2,473.										
NET SECTION 1231 LOSSES <table style="width: 100%; margin-top: 10px;"> <tr> <td colspan="2"><u>FEDERAL</u></td> </tr> <tr> <td style="width: 80%;">2005 LOSSES</td> <td style="text-align: right;">357.</td> </tr> <tr> <td colspan="2"><u>TEXAS</u></td> </tr> <tr> <td>2005 LOSSES</td> <td style="text-align: right;">357.</td> </tr> </table>			<u>FEDERAL</u>		2005 LOSSES	357.	<u>TEXAS</u>		2005 LOSSES	357.	
<u>FEDERAL</u>											
2005 LOSSES	357.										
<u>TEXAS</u>											
2005 LOSSES	357.										

Form **7004**
(Rev. December 2005)
Department of the Treasury
Internal Revenue Service

Application for Automatic 6-Month Extension of Time To File Certain Business Income Tax, Information, and Other Returns

OMB No. 1545-0037

▶ File a separate application for each return.

Type or
Print

Name

Taxpayer identification number

WORK ZONE PRODUCTS, INC.

76-0514717

Number, street, and room or suite number, if P.O. box, see instructions.

File by the due
date for the
return for which
an extension is
requested. See
instructions.

P.O. BOX 924913

City, town, state, and ZIP code (If a foreign address, enter city, province or state, and country (follow the country's practice for entering postal code).)

HOUSTON, TX 77292-4913

Caution: Carefully complete all items. Incorrect information may cause delay or rejection.1 Enter only one code for type of return form that this automatic 6-month extension is for (see below) **12**2 If the foreign corporation does not have an office or place of business in the United States, check here ☐3 If the organization qualifies under Regulations section 1.6081-5 (see instructions), check here ☐4a For calendar year **2005**, or other tax year beginning 20 .., and ending 20 ..

b Short tax year. If this tax year is less than 12 months, check the reason:

☐ Initial return☐ Final return☐ Change in accounting period☐ Consolidated return to be filed5 If the organization is a corporation and is the common parent of a group that intends to file consolidated, check here ☐
Also, you must attach a schedule, listing the name, address, and EIN for each member covered by this extension.6 Tentative total tax (see instructions) **6** **4,526.**7 Total payments and credits (see instructions) **7** **0.**8 Balance due. Subtract line 7 from line 6. Generally, you must deposit this amount using the Electronic Federal Tax Payment System (EFTPS), a Federal Tax Deposit (FTD) Coupon, or Electronic Funds Withdrawal (EFW) (see instructions for exceptions) **8** **4,526.**

Extension Is For:	Form Code	Extension Is For:	Form Code
Form 706-GR (G)	01	Form 1120-L	18
Form 706-GR (I)	02	Form 1120-ND	19
Form 990-B	03	Form 1120-ND (section 4951 taxes)	20
Form 1041 (estate)	04	Form 1120-SC	21
Form 1041 (trust)	05	Form 1120-POL	22
Form 1041-N	06	Form 1120-T	23
Form 1041-GR	07	Form 1120-RIC	24
Form 1042	08	Form 1120-E	25
Form 1065	09	Form 1120-SF	26
Form 1065-B	10	Form 1120-SS	27
Form 1066	11	Form 8612	28
Form 1120	12	Form 8613	29
Form 1120-Combined (cooperatives)	13	Form 8725	30
Form 1120-A	14	Form 9904	31
Form 1120-F	15	Form 8831	32
Form 1120-FSC	16	Form 8878	33
Form 1120-RE	17		

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 7004 (Rev. 12-2005)

CPC20701L 12/08/05

Form 1120 Department of the Treasury Internal Revenue Service	U.S. Corporation Income Tax Return For calendar year 2005 or tax year beginning _____, 2005, ending _____ ▶ See separate instructions.		OMB No. 1545-0123 <div style="font-size: 24pt; font-weight: bold;">2005</div>																																																																																
A Check if: 1 Consolidated return (attach Form 990) <input type="checkbox"/> 2 Personal holding company (attach Schedule H) <input type="checkbox"/> 3 Personal service corp (see instructions) <input type="checkbox"/> 4 Schedule M-3 required (attach Sch M-3) <input type="checkbox"/>		Use IRS label. Otherwise, print or type. WORK ZONE PRODUCTS, INC. P.O. BOX 924913 HOUSTON, TX 77292-4913	B Employer identification number 76-0514717 C Date incorporated 8/14/1996 D Total assets (see instructions) \$ 1,342,748.																																																																																
E Check if: (1) Initial return (2) Final return (3) Name change (4) Address change																																																																																			
INCOME	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">1a Gross receipts or sales</td> <td style="width: 50%;">3,891,016.</td> <td style="width: 50%;">b Loss returns & allowances.</td> <td style="width: 50%;">c Balance.</td> </tr> <tr> <td>2 Cost of goods sold (Schedule A, line 8)</td> <td></td> <td>1c</td> <td>3,891,016.</td> </tr> <tr> <td>3 Gross profit. Subtract line 2 from line 1c</td> <td></td> <td>2</td> <td>1,911,900.</td> </tr> <tr> <td>4 Dividends (Schedule C, line 19)</td> <td></td> <td>3</td> <td>1,979,116.</td> </tr> <tr> <td>5 Interest</td> <td></td> <td>4</td> <td></td> </tr> <tr> <td>6 Gross rents</td> <td></td> <td>5</td> <td></td> </tr> <tr> <td>7 Gross royalties</td> <td></td> <td>6</td> <td></td> </tr> <tr> <td>8 Capital gain net income (attach Schedule D (Form 1120))</td> <td></td> <td>7</td> <td></td> </tr> <tr> <td>9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)</td> <td></td> <td>8</td> <td></td> </tr> <tr> <td>10 Other income (see instructions — attach schedule)</td> <td></td> <td>9</td> <td>-357.</td> </tr> <tr> <td>11 Total income. Add lines 3 through 10</td> <td></td> <td>10</td> <td></td> </tr> <tr> <td></td> <td></td> <td>11</td> <td>1,978,759.</td> </tr> </table>			1a Gross receipts or sales	3,891,016.	b Loss returns & allowances.	c Balance.	2 Cost of goods sold (Schedule A, line 8)		1c	3,891,016.	3 Gross profit. Subtract line 2 from line 1c		2	1,911,900.	4 Dividends (Schedule C, line 19)		3	1,979,116.	5 Interest		4		6 Gross rents		5		7 Gross royalties		6		8 Capital gain net income (attach Schedule D (Form 1120))		7		9 Net gain or (loss) from Form 4797, Part II, line 17 (attach Form 4797)		8		10 Other income (see instructions — attach schedule)		9	-357.	11 Total income. Add lines 3 through 10		10				11	1,978,759.																																
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Sign Here Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.																																																																																			
Signature of officer _____ Date _____ Title _____		Preparer's signature BERNARD ABERCROMBIE Date _____ Firm's Name ABERCROMBIE & ASSOCIATES, PC 14550 TORREY CHASE, SUITE 120 HOUSTON, TX 77014 Preparer's SSN or PTIN P00182748 EIN 20-0695931 Phone no. (281) 440-5740																																																																																	

BAA For Privacy Act and Paperwork Reduction Act Notice, see separate instructions.

CPA0205L 12/12/05

Form 1120 (2005)

Form 1120 (2005) WORK ZONE PRODUCTS, INC. 76-0514717

Page 2

Schedule A Cost of Goods Sold (see instructions)

1	Inventory at beginning of year	1	
2	Purchases	2	997,676
3	Cost of labor	3	
4	Additional Section 263A costs (attach schedule)	4	
5	Other costs (attach schedule)	5	SEE STATEMENT 4
6	Total. Add lines 1 through 5	6	914,224
7	Inventory at end of year	7	1,911,900
8	Cost of goods sold. Subtract line 7 from line 6. Enter here and on page 1, line 2.	8	1,911,900

9a Check all methods used for valuing closing inventory:

- (i) ☐ Cost
(ii) ☐ Lower of cost or market
(iii) ☐ Other (Specify method used and attach explanation.)

b Check if there was a writedown of subnormal goods

c Check if the LIFO inventory method was adopted this tax year for any goods (if checked, attach Form 970)

d If the LIFO inventory method was used for this tax year, enter percentage (or amounts) of closing inventory computed under LIFO

e If property is produced or acquired for resale, do the rules of section 263A apply to the corporation?

Yes ☐ No ☒

f Was there any change in determining quantities, cost, or valuations between opening and closing inventory? If "Yes," attach explanation.

Yes ☐ No ☒**Schedule C Dividends and Special Deductions** (see instructions)

	(a) Dividends received	(b) Percentage	(c) Special deductions (a) x (b)
1 Dividends from less-than-20%-owned domestic corporations (other than debt-financed stock)		70	
2 Dividends from 20%-or-more-owned domestic corporations (other than debt-financed stock)		80	
3 Dividends on debt-financed stock of domestic and foreign corporations		SEE INSTR.	
4 Dividends on certain preferred stock of less-than-20%-owned public utilities		42	
5 Dividends on certain preferred stock of 20%-or-more-owned public utilities		48	
6 Dividends from less-than-20%-owned foreign corporations and certain FSCs		70	
7 Dividends from 20%-or-more-owned foreign corporations and certain FSCs		80	
8 Dividends from wholly owned foreign subsidiaries		100	
9 Total. Add lines 1 through 8. See instructions for limitation.			
10 Dividends from domestic corporations received by a small business investment company operating under the Small Business Investment Act of 1958		100	
11 Dividends from affiliated group members and certain FSCs		100	
12 Dividends from controlled foreign corporations (attach Form 8895)		85	
13 Dividends from foreign corporations not included on lines 3, 6, 7, 8, 11, or 12			
14 Income from controlled foreign corporations under subpart F (attach Form(s) 5471)			
15 Foreign dividend gross-up			
16 IC-DISC and former DISC dividends not included on lines 1, 2, or 3			
17 Other dividends			
18 Deduction for dividends paid on certain preferred stock of public utilities			
19 Total dividends. Add lines 1 through 17. Enter here and on page 1, line 4.			
20 Total special deductions. Add lines 9, 10, 11, 12, and 18. Enter here and on page 1, line 20b.			

Schedule E Compensation of Officers (see instructions for page 1, line 12)

Note: Complete Schedule E only if total receipts (line 1a plus lines 4 through 10 on page 1) are \$500,000 or more.

1	(a) Name of officer	(b) Social security number	(c) Percent of time devoted to business	Percent of corporation stock owned		(f) Amount of compensation
				(d) Common	(e) Preferred	
	PATRICIA OAKES	453-15-6783	100	100%	0.00%	380,477
2	Total compensation of officers					380,477
3	Compensation of officers claimed on Schedule A and elsewhere on return					380,477
4	Subtract line 3 from line 2. Enter the result here and on page 1, line 12.					380,477

Form 1120 (2005) WORK ZONE PRODUCTS, INC. 76-0514717

Page 3

Schedule J Tax Computation (see instructions)

1 Check if the corporation is a member of a controlled group. ☐ **Important:** Members of a controlled group, see instructions.

2a If the box on line 1 is checked, enter the corporation's share of the \$50,000, \$25,000, & \$9,925,000 taxable income brackets (in that order):
 (1) \$ _____ (2) \$ _____ (3) \$ _____

b Enter the corporation's share of: (1) Additional 5% tax (not more than \$11,750) \$ _____
 (2) Additional 3% tax (not more than \$100,000) \$ _____

3 Income tax. Check if a qualified personal service corporation (see instructions). ☐ 3 1,526.

4 Alternative minimum tax (attach Form 4626). 4

5 Add lines 3 and 4. 5 4,526.

6a Foreign tax credit (attach Form 1118). 6a

b Possessions tax credit (attach Form 5735). 6b

c Credits from: ☐ Form 9834 ☐ Form 8907, line 23. 6c

d General business credit. Check box(es) and indicate which forms are attached.
☐ Form 3800 ☐ Form(s) (specify) 6d

e Credit for prior year minimum tax (attach Form 8027). 6e

f Bond credits from: ☐ Form 8860 ☐ Form 8912 6f

7 Total credits. Add lines 6a through 6f. 7

8 Subtract line 7 from line 5. 8 4,526.

9 Personal holding company tax (attach Schedule PH (Form 1120)). 9

10 Other taxes: ☐ Form 4255 ☐ Form 8611 ☐ Form 8597
 Check if from: ☐ Form 8866 ☐ Form 8902 ☐ Other (all schedule) 10

11 Total tax. Add lines 8 through 10. Enter here and page 1, line 31. 11 4,526.

Schedule K Other Information (see instructions)

	Yes	No		Yes	No
1 Check accounting method: a <input type="checkbox"/> Cash b <input checked="" type="checkbox"/> Accrual c <input type="checkbox"/> Other (specify) _____			7 At any time during the tax year, did one foreign person own, directly or indirectly, at least 25% of (a) the total voting power of all classes of stock of the corporation entitled to vote or (b) the total value of all classes of stock of the corporation? If 'Yes,' enter: (a) Percentage owned _____ and (b) Owner's country _____		X
2 See the instructions and enter the: a Business activity code no. 238900 b Business activity CONSTRUCTION PRODUCT c Product or service ROAD BARRICADES			c The corporation may have to file Form 5472, Information Return of a 25% Foreign-Owned U.S. Corporation or a Foreign Corporation Engaged in a U.S. Trade or Business. Enter number of Forms 5472 attached _____		
3 At the end of the tax year, did the corporation own, directly or indirectly, 50% or more of the voting stock of a domestic corporation? (For rules of attribution, see section 267(c).) If 'Yes,' attach a schedule showing: (a) name and employer identification number (EIN), (b) percentage owned, and (c) taxable income or (loss) before NOL and special deductions of such corporation for the tax year ending with or within your tax year.		X	8 Check this box if the corporation issued publicly offered debt instruments with original issue discount <input type="checkbox"/> If checked, the corporation may have to file Form 8281, Information Return for Publicly Offered Original Issue Discount Instruments.		
4 Is the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? If 'Yes,' enter name and EIN of the parent corporation _____		X	9 Enter the amount of tax-exempt interest received or accrued during the tax year. \$ NONE		
5 At the end of the tax year, did any individual, partnership, corporation, estate or trust own, directly or indirectly, 50% or more of the corporation's voting stock? (For rules of attribution, see section 267(c).) If 'Yes,' attach a schedule showing name and identifying number. (Do not include any information already entered in 4 above.) Enter % owned 100. % SEE STATEMENT 5		X	10 Enter the number of shareholders at the end of the tax year (if 100 or fewer). 1		
6 During this tax year, did the corporation pay dividends (other than stock dividends and distributions in exchange for stock) in excess of the corporation's current and accumulated earnings and profits? (See sections 301 and 316). If 'Yes,' file Form 5452, Corporate Report of Nondividend Distributions. If this is a consolidated return, answer here for the parent corporation and on Form 851, Affiliations Schedule, for each subsidiary.		X	11 If the corporation has an NOL for the tax year and is electing to forego the carryback period, check here <input type="checkbox"/> If the corporation is filing a consolidated return, the statement required by Temporary Regulations section 1.1502-21T(b)(3) must be attached or the election will not be valid.		
			12 Enter the available NOL carryover from prior tax years (Do not reduce it by any deduction on line 29a.) \$ NONE		
			13 Are the corporation's total receipts (line 1a plus lines 4 through 10 on page 1) for the tax year and its total assets at the end of the tax year less than \$250,000? If 'Yes,' the corporation is not required to complete Schedules L, M-1, and M-2 on page 4. Instead, enter the total amount of cash distributions and the book value of property distributions (other than cash) made during the tax year. \$		X

Note: If the corporation, at any time during the tax year, had assets or operated a business in a foreign country or U.S. possession, it may be required to attach Schedule N (Form 1120), Foreign Operations of U.S. Corporations, to this return. See Schedule N for details.

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Form 1120 (2005)

Form 1120 (2005) WORK ZONE PRODUCTS, INC. 76-0514717

Note: The corporation is not required to complete Schedules L, M-1 and M-2 if Question 13 on Schedule K is answered "Yes."

Page 4

Schedule L Balance Sheets per Books

	Beginning of tax year		End of tax year	
	(a)	(b)	(c)	(d)
Assets				
1 Cash		14,953.		47,614.
2a Trade notes and accounts receivable	736,583.		590,846.	
b Less allowance for bad debts		736,583.		590,846.
3 Inventories				
4 U.S. government obligations				
5 Tax-exempt securities (see instructions)				
6 Other current assets (attach schedule) SEE ST. 6				
7 Loans to shareholders		80,316.		335,079.
8 Mortgage and real estate loans		89,414.		89,414.
9 Other investments (attach schedule)				
10a Buildings and other depreciable assets	1,175,138.		1,302,117.	
b Less accumulated depreciation	869,911.	305,227.	1,054,118.	247,999.
11a Depletable assets				
b Less accumulated depletion				
12 Land (net of any amortization)				
13a Intangible assets (amortizable only)	1,066.		1,066.	
b Less accumulated amortization	1,066.		1,066.	
14 Other assets (attach schedule) SEE ST. 7				
15 Total assets		31,678.		31,796.
Liabilities and Shareholders' Equity		1,258,171.		1,342,748.
16 Accounts payable		318,661.		340,239.
17 Mortgages, notes, bonds payable in less than 1 year		398,365.		399,837.
18 Other current liabilities (attach sch) SEE ST. 8		8,194.		64,712.
19 Loans from shareholders				
20 Mortgages, notes, bonds payable in 1 year or more		369,729.		364,704.
21 Other liabilities (attach schedule)				
22 Capital stock: a Preferred stock				
b Common stock	2,000.	2,000.	2,000.	2,000.
23 Additional paid in capital		36,535.		36,535.
24 Retained earnings - Appropri (att sch)				
25 Retained earnings - Unappropriated		124,687.		134,721.
26 Adjust to shareholders' equity (att sch)				
27 Less cost of treasury stock				
28 Total liabilities and shareholders' equity		1,258,171.		1,342,748.

Schedule M-1 Reconciliation of Income (Loss) per Books With Income per Return (see instructions)

1 Net income (loss) per books	10,034.	7 Income recorded on books this year not included on this return (itemize):	
2 Federal income tax per books	10,141.	Tax-exempt interest \$	
3 Excess of capital losses over capital gains			
4 Income subject to tax not recorded on books this year (itemize):			
5 Expenses recorded on books this year not deducted on this return (itemize):		8 Deductions on this return not charged against book income (this year) (itemize):	
a Depreciation \$		a Depreciation \$	
b Charitable contributions \$		b Charitable contributions \$	2,993.
c Travel & entertainment \$	8,518.		
STATEMENT 9	4,473.		
6 Add lines 1 through 5	12,991.	9 Add lines 7 and 8	2,993.
	33,166.	10 Income (page 1, line 28) - line 6 less line 9	30,173.

Schedule M-2 Analysis of Unappropriated Retained Earnings per Books (Line 25, Schedule L)

1 Balance at beginning of year	124,687.	5 Distributions:	
2 Net income (loss) per books	10,034.	a Cash	
3 Other increases (itemize):		b Stock	
		c Property	
4 Add lines 1, 2, and 3	134,721.	6 Other decreases (itemize):	
		7 Add lines b and 6	
		8 Balance at end of year (line 4 less line 7)	134,721.

CPA00234L 10/17/05

Form 1120 (2005)

Form **2220****Underpayment of Estimated Tax by Corporations**

OMB No. 1545-0142

2005Department of the Treasury
Internal Revenue Service▶ See separate instructions.
▶ Attach to the corporation's tax return.

Name

WORK ZONE PRODUCTS, INC.

Employer identification number

76-0514/17

Note: Generally, the corporation is not required to file Form 2220 (see Part II below for exceptions) because the IRS will figure any penalty owed and bill the corporation. However, the corporation may still use Form 2220 to figure the penalty. If so, enter the amount from page 2, line 34 on the estimated tax penalty line of the corporation's income tax return, but do not attach Form 2220.

Part I Required Annual Payment

1	Total tax (see instructions)	1	4,526.
2a	Personal holding company tax (Schedule PH (Form 1120), line 26) included on line 1	2a	
b	Look-back interest included on line 1 under section 460(b)(2) for completed long term contracts or section 167(g) for depreciation under the income forecast method	2b	
c	Credit for federal tax paid on fuels (see instructions)	2c	
d	Total. Add lines 2a through 2c	2d	
3	Subtract line 2d from line 1. If the result is less than \$500, do not complete or file this form. The corporation does not owe the penalty	3	4,526.
4	Enter the tax shown on the corporation's 2004 income tax return (see instructions). Caution: If the tax is zero or the tax year was for less than 12 months, skip this line and enter the amount from line 3 on line 5	4	9,435.
5	Required Annual Payment. Enter the smaller of line 3 or line 4. If the corporation is required to skip line 4, enter the amount from line 3	5	4,526.

Part II Reasons for Filing — Check the boxes below that apply. If any boxes are checked, the corporation **must** file Form 2220, even if it does not owe a penalty (see instructions).

- 6 ☐ The corporation is using the adjusted seasonal installment method.
- 7 ☐ The corporation is using the annualized income installment method.
- 8 ☐ The corporation is a 'large corporation' figuring its first required installment based on the prior year's tax.

Part III Figuring the Underpayment

	(a)	(b)	(c)	(d)	
9 Installment due dates. Enter in columns (a) through (d) the 15th day of the 4th (Form 990 — PF filers: Use 5th month), 6th, 9th, and 12th months of the corporation's tax year.	9	4/15/05	6/15/05	9/15/05	12/15/05
10 Required installments. If the box on line 6 and/or line 7 above is checked, enter the amounts from Schedule A, line 36. If the box on line 8 (but not 6 or 7) is checked, see instructions for the amounts to enter. If none of these boxes are checked, enter 25% of line 5 above in each column.	10	1,131.	1,131.	1,132.	1,132.
11 Estimated tax paid or credited for each period (see instructions). For column (a) only, enter the amount from line 11 on line 15	11				
Complete lines 12 through 18 of one column before going to the next column.					
12 Enter amount, if any, from line 18 of the preceding column	12				
13 Add lines 11 and 12	13				
14 Add amounts on lines 10 and 17 of the preceding column	14		1,131.	2,262.	3,394.
15 Subtract line 14 from line 13. If zero or less, enter -0-	15	0.	0.	0.	0.
16 If the amount on line 15 is zero, subtract line 13 from line 14. Otherwise, enter -0-	16		1,131.	2,262.	
17 Underpayment. If line 15 is less than or equal to line 10, subtract line 15 from line 10. Then go to line 12 of the next column. Otherwise, go to line 18	17	1,131.	1,131.	1,132.	1,132.
18 Overpayment. If line 10 is less than line 15, subtract line 10 from line 15. Then go to line 12 of the next column.	18				

Go to Part IV on page 2 to figure the penalty. Do not go to Part IV if there are no entries on line 17 — no penalty is owed.

BAA For Paperwork Reduction Act Notice, see separate instructions.

Form 2220 (2005)

CPC203121 01/13/06

Form 2220 (2006) WORK ZONE PRODUCTS, INC.

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Page 2

Part IV Figuring the Penalty

	(a)	(b)	(c)	(d)
19 Enter the date of payment or the 15th day of the 3rd month after the close of the tax year, whichever is earlier (see instructions). (Form 990-PF and Form 990-T filers: Use 5th month instead of 3rd month.)	19 3/15/06	3/15/06	3/15/06	3/15/06
20 Number of days from due date of installment on line 9 to the date shown on line 19	20 334	273	181	90
21 Number of days on line 20 after 4/15/2005 and before 10/1/2005	21 168	107	15	
22 Underpayment on line 17 \times $\frac{\text{Number of days on line 21}}{365}$ \times 6%	22 31.23	19.89	2.79	
23 Number of days on line 20 after 9/30/2005 and before 4/1/2006	23 166	166	166	90
24 Underpayment on line 17 \times $\frac{\text{Number of days on line 23}}{365}$ \times 7%	24 36.01	36.01	36.04	19.54
25 Number of days on line 20 after 3/31/2006 and before 7/1/2006	25			
26 Underpayment on line 17 \times $\frac{\text{Number of days on line 25}}{365}$ \times *%	26			
27 Number of days on line 20 after 6/30/2006 and before 10/1/2006	27			
28 Underpayment on line 17 \times $\frac{\text{Number of days on line 27}}{365}$ \times *%	28			
29 Number of days on line 20 after 9/30/2006 and before 1/1/2007	29			
30 Underpayment on line 17 \times $\frac{\text{Number of days on line 29}}{365}$ \times *%	30			
31 Number of days on line 20 after 12/31/2006 and before 2/16/2007	31			
32 Underpayment on line 17 \times $\frac{\text{Number of days on line 31}}{365}$ \times *%	32			
33 Add lines 22, 24, 26, 28, 30, and 32	33 67.24	55.90	38.83	19.54
34 Penalty. Add columns (a) through (d) of line 33. Enter the total here and on Form 1120, line 33; Form 1120-A, line 29; or the comparable line for other income tax returns	34			182.

*For underpayments paid after March 31, 2006: For lines 26, 28, 30, and 32, use the penalty interest rate for each calendar quarter, which the IRS will determine during the first month in the preceding quarter. These rates are published quarterly in an IRS News Release and in a revenue ruling in the Internal Revenue Bulletin. To obtain this information on the Internet, access the IRS website at www.irs.gov. You can also call 1-800-829-4933 to get interest rate information.

Form 2220 (2006)

CPC200412L 01/13/06

Form **4562**
(Rev. January 2006)Department of the Treasury
Internal Revenue Service**Depreciation and Amortization**
(Including Information on Listed Property)

▶ See separate instructions. ▶ Attach to your tax return.

OMB No. 1545-0172

2005Attachment
Sequence No. 67

Name(s) shown on return

WORK ZONE PRODUCTS, INC.

Business or activity to which this form relates

Identifying number
76-0514717**FORM 4562****Part I Election To Expense Certain Property Under Section 179**
Note: If you have any listed property, complete Part V before you complete Part I.

1	Maximum amount. See the instructions for a higher limit for certain businesses.	1	\$105,000.
2	Total cost of section 179 property placed in service (see instructions).	2	136,207.
3	Threshold cost of section 179 property before reduction in limitation.	3	\$420,000.
4	Reduction in limitation. Subtract line 3 from line 2. If zero or less, enter -0-	4	0.
5	Dollar limitation for tax year. Subtract line 4 from line 1. If zero or less, enter -0-. If married filing separately, see instructions.	5	105,000.
6	(a) Description of property SEE STATEMENT 10	(b) Cost (business use only)	(c) Elected cost 102,000.
7	Listed property. Enter the amount from line 29	7	0.
8	Total elected cost of section 179 property. Add amounts in column (c), lines 6 and 7.	8	102,000.
9	Tentative deduction. Enter the smaller of line 5 or line 8.	9	102,000.
10	Carryover of disallowed deduction from line 13 of your 2004 Form 4562.	10	0.
11	Business income limitation. Enter the smaller of business income (not less than zero) or line 5 (see instrs.).	11	105,000.
12	Section 179 expense deduction. Add lines 9 and 10, but do not enter more than line 11.	12	102,000.
13	Carryover of disallowed deduction to 2006. Add lines 9 and 10, less line 12.	13	0.

Note: Do not use Part II or Part III below for listed property. Instead, use Part V.

Part II Special Depreciation Allowance and Other Depreciation (Do not include listed property.) (See instructions.)

14	Special allowance for certain aircraft, certain property with a long production period, and qualified New York Liberty or GO Zone property (other than listed property) placed in service during the tax year (see instrs.).	14	
15	Property subject to section 168(l)(1) election.	15	
16	Other depreciation (including ACRS).	16	

Part III MACRS Depreciation (Do not include listed property.) (See instructions.)**Section A**

17	MACRS deductions for assets placed in service in tax years beginning before 2005.	17	56,642.
18	If you are electing to group any assets placed in service during the tax year into one or more general asset accounts, check here <input type="checkbox"/>		

Section B - Assets Placed in Service During 2005 Tax Year Using the General Depreciation System

(a) Classification of property	(b) Month and year placed in service	(c) Basis for depreciation (business/investment use only - see instructions)	(d) Recovery period	(e) Convention	(f) Method	(g) Depreciation deduction
19a 3-year property						
b 5-year property						
c 7-year property		34,207.	7	HY	200DB	4,888.
d 10-year property						
e 15-year property						
f 20-year property						
g 25-year property						
h Residential rental property			25 yrs		S/L	
i Nonresidential real property			27.5 yrs	MM	S/L	
			27.5 yrs	MM	S/L	
			39 yrs	MM	S/L	
				MM	S/I	

Section C - Assets Placed in Service During 2005 Tax Year Using the Alternative Depreciation System

20a Class life					
b 12 year		12 yrs		S/L	
c 40 year		40 yrs	MM	S/L	

Part IV Summary (see instructions)

21	Listed property. Enter amount from line 28.	21	16,531.
22	Total. Add amounts from line 12, lines 14 through 17, lines 19 and 20 in column (g), and line 21. Enter here and on the appropriate lines of your return. Partnerships and S corporations - see instructions.	22	180,061.
23	For assets shown above and placed in service during the current year, enter the portion of the basis attributable to section 263A costs.	23	

BAA For Paperwork Reduction Act Notice, see separate instructions.

F112081PL 12/29/05

Form 4562 (2005) (Rev. 1-2006)

Form 4562 (2005) (Rev 1-2006) WORK ZONE PRODUCTS, INC.

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Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)**Note:** For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.**Section A – Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)**

24a On you have evidence to support the business/investment use claimed?					<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	24b If "Yes," is the evidence written?			<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special allowance for certain aircraft, certain property with a long production period, and qualified New York Liberty or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)								25			
26 Property used more than 50% in a qualified business use:											
2000 F650	4/30/02	100.0	31,646.	31,646.	5.0	200DBHY	1,775.				
2000 F350	2/14/02	100.0	24,460.	15,899.	5.0	200DBHY	1,775.				
2003 MERCEDE	10/31/02	100.0	42,294.	34,634.	5.0	200DBHY	1,775.				
27 Property used 50% or less in a qualified business use:											
								28	16,531.		
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1								29	0.		

Section B – Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C – Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		
Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.		

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2005 tax year (see instructions):					
43 Amortization of costs that began before your 2005 tax year					
44 Total. Add amounts in column (f). See instructions for where to report					44

FD70612L 12/29/05

Form 4562 (2005) (Rev 1-2006)

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WORK ZONE PRODUCTS, INC.

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Part V**Listed Property**

(Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A -- Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a Do you have evidence to support the business/investment use claimed? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No									24b If "Yes," is the evidence written? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Election: section 179 cost		
25 Special allowance for certain aircraft, certain property with a long production period, and qualified New York Liberty or CO Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions).									25	
26 Property used more than 50% in a qualified business use:										
2004 YUKON	11/25/03	100.0	37,001	25,991	5.0	200DBHY	3,250			
2002 F-150	6/18/03	100.0	15,169	7,584	5.0	200DBHY	1,456			
2003 F-250	4/17/03	100.0	29,280	21,320	5.0	200DBHY	3,250			
27 Property used 50% or less in a qualified business use:										
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1									28	
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1									29	

Section B -- Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

30 Total business/investment miles driven during the year (do not include commuting miles).	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off duty hours?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
35 Was the vehicle used primarily by a more than 5% owner or related person?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
36 Is another vehicle available for personal use?	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No

Section C -- Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?	Yes	No
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? See the instructions for vehicles used by corporate officers, directors, or 1% or more owners.		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions.)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of assets	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2005 tax year (see instructions):					
43 Amortization of costs that began before your 2005 tax year					
44 Total. Add amounts in column (f). See instructions for where to report.					44

FD703121, 12/29/05

Form 4562 (2005) (Rev. 1-2006)

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WORK ZONE PRODUCTS, INC.

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Part V Listed Property (Include automobiles, certain other vehicles, cellular telephones, certain computers, and property used for entertainment, recreation, or amusement.)

Note: For any vehicle for which you are using the standard mileage rate or deducting lease expense, complete only 24a, 24b, columns (a) through (c) of Section A, all of Section B, and Section C if applicable.

Section A - Depreciation and Other Information (Caution: See the instructions for limits for passenger automobiles.)

24a (b) Do you have evidence to support the business/investment use claimed?		Yes		No		24b If "Yes," is the evidence written?		Yes		No	
(a) Type of property (list vehicles first)	(b) Date placed in service	(c) Business/investment use percentage	(d) Cost or other basis	(e) Basis for depreciation (business/investment use only)	(f) Recovery period	(g) Method/Convention	(h) Depreciation deduction	(i) Elected section 179 cost			
25 Special allowance for certain aircraft, certain property with a long production period, and qualified New York Liberty or GO Zone property placed in service during the tax year and used more than 50% in a qualified business use (see instructions)											
26 Property used more than 50% in a qualified business use:											
2003 F550	2/20/03	100.0	37,003	29,043	5.0	200DBMY	3,250				
27 Property used 50% or less in a qualified business use:											
28 Add amounts in column (h), lines 25 through 27. Enter here and on line 21, page 1											
29 Add amounts in column (i), line 26. Enter here and on line 7, page 1											

Section B - Information on Use of Vehicles

Complete this section for vehicles used by a sole proprietor, partner, or other "more than 5% owner," or related person. If you provided vehicles to your employees, first answer the questions in Section C to see if you meet an exception to completing this section for those vehicles.

	(a) Vehicle 1		(b) Vehicle 2		(c) Vehicle 3		(d) Vehicle 4		(e) Vehicle 5		(f) Vehicle 6	
	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
30 Total business/investment miles driven during the year (do not include commuting miles)												
31 Total commuting miles driven during the year												
32 Total other personal (noncommuting) miles driven												
33 Total miles driven during the year. Add lines 30 through 32												
34 Was the vehicle available for personal use during off-duty hours?												
35 Was the vehicle used primarily by a more than 5% owner or related person?												
36 Is another vehicle available for personal use?												

Section C - Questions for Employers Who Provide Vehicles for Use by Their Employees

Answer these questions to determine if you meet an exception to completing Section B for vehicles used by employees who are not more than 5% owners or related persons (see instructions).

	Yes	No
37 Do you maintain a written policy statement that prohibits all personal use of vehicles, including commuting, by your employees?		
38 Do you maintain a written policy statement that prohibits personal use of vehicles, except commuting, by your employees? (See the instructions for vehicles used by corporate officers, directors, or 1% or more owners)		
39 Do you treat all use of vehicles by employees as personal use?		
40 Do you provide more than five vehicles to your employees, obtain information from your employees about the use of the vehicles, and retain the information received?		
41 Do you meet the requirements concerning qualified automobile demonstration use? (See instructions)		

Note: If your answer to 37, 38, 39, 40, or 41 is "Yes," do not complete Section B for the covered vehicles.

Part VI Amortization

(a) Description of costs	(b) Date amortization begins	(c) Amortizable amount	(d) Code section	(e) Amortization period or percentage	(f) Amortization for this year
42 Amortization of costs that begins during your 2006 tax year (see instructions):					
43 Amortization of costs that began before your 2006 tax year					
44 Total. Add amounts in column (f). See instructions for where to report					

FD-4562 (2005) 12/29/05

Form 4562 (2005) (Rev. 1-2006)

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2005

FEDERAL STATEMENTS

PAGE 1

WORK ZONE PRODUCTS, INC.

76-0514717

STATEMENT 1
FORM 1120, LINE 17
TAXES AND LICENSES

LICENSES AND PERMITS	\$	21,287.
PAYROLL TAXES		2,456.
		90,699.
TOTAL	\$	<u>114,442.</u>

STATEMENT 2
FORM 1120, LINE 19
CHARITABLE CONTRIBUTIONS

CARRYOVER FROM 2003	\$	360.
DISALLOWED CONTRIBUTIONS DUE TO 10% LIMIT		5,466.
		-2,473.
TOTAL	\$	<u>3,353.</u>

STATEMENT 3
FORM 1120, LINE 26
OTHER DEDUCTIONS

AUTO AND TRUCK	\$	16,049.
BANK CHARGES		2,455.
COMPUTER		5,820.
CREDIT CARD FEES		3,020.
DUES AND SUBSCRIPTIONS		32,212.
INSURANCE		122,589.
LEGAL AND PROFESSIONAL		27,897.
LIENS		660.
MAINTENANCE EXPENSE		32,720.
MEALS AND ENTERTAINMENT		8,519.
OFFICE EXPENSE		11,368.
POSTAGE		3,683.
PRINTING		1,110.
QUANTITY VARIANCE		2,155.
SECURITY		16,239.
SUPPLIES		74,260.
TELEPHONE		42,232.
TRAINING		8,579.
TRAVEL		26,215.
UNIFORMS		7,850.
UTILITIES		17,524.
TOTAL	\$	<u>463,156.</u>

STATEMENT 4
FORM 1120, SCHEDULE A, LINE 5
OTHER COST OF GOODS SOLD

AUTO INSURANCE	\$	44,895.
BID EXPENSE		4,111.
EQUIPMENT RENTAL		17,743.
EQUIPMENT REPAIRS		18,171.
FREIGHT & DELIVERY		11,648.

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FEDERAL STATEMENTS

PAGE 2

WORK ZONE PRODUCTS, INC.

76-0514717

STATEMENT 4 (CONTINUED)
FORM 1120, SCHEDULE A, LINE 5
OTHER COST OF GOODS SOLD

FUEL.....	\$	121,847.
PROPERTY TAXES.....		14,624.
SUBCONTRACTORS.....		681,185.
TOTAL	\$	<u>914,224.</u>

STATEMENT 5
FORM 1120, SCHEDULE K, LINE 5
50% OR MORE OWNERS

NAME : PATRICIA OAKES
ID NUMBER : 453-15-6783
PERCENTAGE OWNED : 100.00%

STATEMENT 6
FORM 1120, SCHEDULE L, LINE 6
OTHER CURRENT ASSETS

	BEGINNING	ENDING
NOTE RECEIVABLE.....	\$ 80,316.	\$ 80,316.
NOTE RECEIVABLE - TRIPLE O.....	0.	146,453.
RETAINAGE HELD.....	0.	108,310.
TOTAL	\$ <u>80,316.</u>	\$ <u>335,079.</u>

STATEMENT 7
FORM 1120, SCHEDULE L, LINE 14
OTHER ASSETS

	BEGINNING	ENDING
CONSTRUCTION IN PROGRESS.....	\$ 31,678.	\$ 31,796.
TOTAL	\$ <u>31,678.</u>	\$ <u>31,796.</u>

STATEMENT 8
FORM 1120, SCHEDULE L, LINE 18
OTHER CURRENT LIABILITIES

	BEGINNING	ENDING
CREDIT CARDS PAYABLE.....	\$ 0.	\$ 29,204.
STATE TAX PAYABLE.....	8,194.	35,508.
TOTAL	\$ <u>8,194.</u>	\$ <u>64,712.</u>

2005

FEDERAL STATEMENTS

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WORK ZONE PRODUCTS, INC.

76-0514717

STATEMENT 9
FORM 1120, SCHEDULE M-1, LINE 5
BOOK EXPENSES NOT DEDUCTED

OFFICER LIFE INSURANCE PREMIUMS	\$	4,473.
TOTAL	\$	4,473.

STATEMENT 10
FORM 4562, PART I
ELECTION TO EXPENSE CERTAIN TANGIBLE PROPERTY (SECTION 179)

DESCRIPTION OF PROPERTY	COST	ELECTED COST
7-YEAR THERMOPLASTIC TRAILER	49,469.	\$ 15,262.
7-YEAR F&F	771.	771.
7-YEAR F&F	7,046.	7,046.
7-YEAR F&F	1,716.	1,716.
7-YEAR F&F	6,734.	6,734.
7-YEAR F&F	5,582.	5,582.
7-YEAR HYDRAULIC PREMELTER	9,000.	9,000.
7-YEAR 8 HP BLOWER	975.	975.
7-YEAR LINE LAZER 3400	3,450.	3,450.
7-YEAR STRIPING	1,521.	1,521.
7-YEAR TRANTEX	2,057.	2,057.
7-YEAR 2005 FORD F450 STRIPING	41,234.	41,234.
7-YEAR REFRIGERATOR AND FREEZER	2,021.	2,021.
7-YEAR COPTER	1,178.	1,178.
5-YEAR COMPUTER	1,170.	1,170.
5-YEAR COMPUTER	1,061.	1,061.
5-YEAR COMPUTER	1,222.	1,222.
TOTAL	\$	102,000.

STATEMENT 11
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SALES OR EXCHANGES OF CERTAIN PROPERTY HELD OVER ONE YEAR

DESCRIPTION OF PROPERTY	DATE ACQUIRED	DATE SOLD	SALES PRICE	DEPRECIATION ALLOWED	COST OR BASIS	GAIN OR LOSS
SHELVING & BUILTINS	12/31/97	3/31/05		2,619.	2,619.	\$ 0.
REMODELING	2/07/97	3/31/05		605.	605.	0.
ELECTRICAL WORK	7/23/97	3/31/05		485.	485.	0.
LEASEHOLD IMPROVEMENTS	8/31/97	3/31/05		3,203.	3,203.	0.
WORKSTATION	12/31/97	3/31/05		996.	996.	0.
FENCE	10/24/01	3/31/05		863.	1,063.	-200.
LEASEHOLD ADDITIONS	12/14/01	3/31/05		100.	257.	-157.
TOTAL					\$	-357.